

CONFIDENTIAL GRADUATE PROGRAM RECOMMENDATION FORM

Elizabethtown College
School of Continuing and Professional Studies
Edward R. Murphy Center
One Alpha Drive
Elizabethtown, PA 17022
(717)361-1411
(717)361-1466 (fax)

Direct questions to: Jason Reinfried
(717) 361-1291
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APPLICANT SECTION Please print or type (to be completed by the applicant)

Applicant Last Name _____ Applicant First Name _____

- Degree Seeking: Master of Business Administration (MBA)
 Master of Strategic Leadership (MSL)

In accordance with the Family Education Rights Privacy Act of 1974, you have the right to review this recommendation. If you wish to have this evaluation considered confidential between the evaluator and Elizabethtown College, select the appropriate option below.

- I waive my right to review this recommendation.
 I do not waive my right to review this recommendation.

RECOMMENDER SECTION

Name _____

Position/Title _____

Company/Organization _____

Address _____

City _____ State _____ Zip Code _____

Daytime Telephone _____

Are you the applicant's supervisor? Yes No

Your assessment of the applicant would be of assistance to the Admissions Committee. Please respond candidly to the following questions, and, if additional space is required, please feel free to attach a separate sheet.

1. How long and in what capacity have you known the applicant?

2. Please comment on the applicant's ability to write clearly and competently, and on her/his ability to make effective oral presentations.

3. Please comment on the applicant's strengths and weaknesses, ability to work with peers, ability to accept feedback, and how those characteristics may impact her/his potential for success in a graduate program.

4. Please comment on the applicant's management or leadership experience.

5. Any observations you may wish to make concerning the applicant's capacity for academic work in an accelerated program would be appreciated.

6. In my opinion, the applicant will:

- Be an outstanding graduate student
- Be an above average graduate student
- Be an average graduate student
- Be a poor graduate student
- Not succeed on the graduate level

Signature of Recommender _____ **Date:** _____

THANK YOU!

We realize the time and effort involved in preparing this evaluation, and we greatly appreciate your help.